



every child. one voice.

COUNCIL OF THE YEAR NOMINATION FORM

Form with fields for Council Name, Michigan ID#, Council President's Name, Council President's Address, City, Zip, Council President's Phone (Day), (Evening), Council President's E-mail, Nominator's Name, Nominator's Address, City, Zip, Nominator's Phone (Day), (Evening), Nominator's E-mail.

->Signature of Council President or Secretary & Date

Requirement Checklist: Following are procedures local units/councils must follow in submitting applications to the state office. Entries will be disqualified if the following requirements are not met.

Eligibility - these criteria must be described in the written explanation

- PTA/PTSA council in good standing
Held a leadership training session for local units (include flyers and public relations used)
Had representation at a State or Region workshop (give date and event)
Held a council project or critical issues program in which all local units participated (provide details)
Had delegates attending the last MPTSA Convention (give specific names)
List legislative activity at local, state or national levels
Had active representation at local Board of Education meetings and established a close working relationship

Nomination Form

- Typed (no smaller than 11-point) and attached to entry
Correct Michigan PTA/PTSA ID number
Signed with original signature of council president or secretary

Explanation

- Submitted on one side of 8 1/2" x 11" sheets of plain white paper
Typed in black (no smaller than 11-point)
Double-spaced with one-inch margins on all sides
Council name must appear at the top of each page along with page numbers

Submission

- No binder, covers, or colored paper
No facsimiles (faxed copies) or e-mailed applications will be accepted.
Submit original entry and 5 copies - each set paper clipped. Do not staple.
Must be received by the state office on or before February 28th

Return Nomination Form and all required documentation to:

MPTSA Awards Committee
3300 Washtenaw Ave. Suite 220
Ann Arbor, MI 48104-4294
Phone: 734-975-9500

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

Rec'd Unit Dues Budget Audit Bylaws